DEPARTMENT OF HEALTH, EDUCATION, AND WELFARE

CENTER FOR DISEASE CONTROL
ATLANTA, GEORGIA

SUMMARY MINUTES OF MEETING

February 12, 1974

The Immunization Practices Advisory Committee met in Atlanta, Geo a, February 12, 1974.

COMMITTEE MEMBERS PRESENT

Dr. David J. Sencer, Chairman
Dr. H. Bruce Dull, Executive Secretary
Dr. Elizabeth Barrett-Connor
Dr. R. LeRoy Carpenter
Dr. Theodore C. Eickhoff
Dr. E. Charlton Prather
Dr. Gilbert M. Schiff
Dr. Eleanor G. Shore

Ex Officio

Dr. Paul Parkman, Bureau of Biologics, FDA, DHEW

Liaison (American Academy of Pediatrics)

Dr. Thomas Frothingham

COMMITTEE MEMBERS ABSENT

Dr. Alexander D. Langmuir

STAFF PRESENT

Bureau of Epidemiology:	Dr. John Bryan
	Dr. Fred Connel
	Dr. Roger Feldm
	Dr. William Fly
	Dr. Michael Gre
	Dr. Michael Hat ick
	Dr. Robert Rubi
Bureau of Laboratories:	Dr. Marion Cole
	Dr. Walter Dowd
	Dr. Gary Noble
	Dr. Jack Poland
Bureau of Smallpox Eradication:	Mr. James Hicks
	Dr. Jeffrey Kop
Bureau of State Services:	Dr. David Benne
	Dr. Lyle Conrad
	Mr. Harold Maul
	Dr. John Modlin
	Dr. Robert Rose erg
	Dr. John Witte

The meeting was called to order at 8:30 a.m. by the Chairman, who :oceeded promptly to the scheduled agenda. The following summary attempts) high-light the Committee deliberation.

Plague Vaccine

Discussions begun at the October 9-10, 1973, meeting were continu . Dr. Poland stated that essentially only persons who are in regula :ontact with plague through work or residence in endemic areas are candid :s for vaccine. Endemic areas are primarily in southeast Asia, although)untries in South America, Europe, and Africa also report plague in their ıntainous or upland regions.

The Committee recommended modifying its plague statement to indic : an even more selective use of vaccine for persons with the likelihoo)f significant exposure. The group also reviewed data on booster im ıization and agreed that satisfactory antibody levels were maintained foll .ng a primary series plus 3 boosters with subsequent boosters no more o :n than every 1 to 2 years. Draft modifications in the statement were re :wed and approved.

Meningococcal Meningitis Vaccine

Review begun at the October 9-10, 1973, meeting was continued. T group's consideration was primarily of a proposed draft statement on the ıceptual use of serogroup C polysaccharide vaccine in the United States. : Committee recommended editorial changes, but concurred in the statement's g :ral intent for very limited, selective use of such an antigen.

RhIG Report

Drs. Flynt and Connell of the Birth Defects Branch, Bureau of Epi ıiology, discussed their intent to establish a surveillance of Rh hemolyti lisease of the newborn. This activity would encompass an evaluation of t ongoing use of RhIG in clinical and public health practice. The Committe :ncouraged uniform reporting standards and proposed a coordinated effort thr ;h appli-cable medical and public health agencies.

Measles Surveillance (Dr. Rosenberg)

Reported measles cases declined by 16 percent in 1973 relative to)72. However, some States experienced increases, and sizable epidemics ıong non-vaccinated children were recognized. Nevertheless, evidence .tinues to indicate a greater than 90 percent effectiveness of vaccine ag .st natural challenge.

A few cases of alleged "atypical measles" in vaccinated children ve been described. Their actual relationship to induced immunity has not een established. The Committee urged efforts to evaluate all possibl associations.

Subacute Sclerosing Panencephalitis (Dr. Modlin)

Although no evidence that SSPE has been related directly to measl vacci- nation, a collaborative surveillance between the University of Te essee and CDC is being established to explore the condition and any of s antecedents.

Rubella Surveillance (Dr. Modlin)

Congenital rubella syndrome surveillance has been difficult to ev iate because reporting is so incomplete. New sources of information h e been sought, namely those offering services to deaf and blind children iere disabilities are possibly related to rubella infection.

Age distribution of reported rubella cases suggests a drift to so vhat older children and adolescents who are susceptible. This may ind ite that protection of younger children through vaccination has accen ited, in relative terms, the cases in older children and adolescents.

Dr. Bennett reported on rubella vaccine field trials begun in Haw in 1969. Results indicate persistence of rubella antibody in essent .ly all vaccinees, now 2-3 years following administration of the 3 li ised rubella antigens (HPV-77 DK-12, HPV-77 DE-5, and the Cendehill st n). He also reported on the ability of the RA27/3 strain, given eithe intranasally or subcutaneously, to boost antibody levels in 25-40 ercent of vaccinees having received HPV-77 DE-5 or Cendehill strain vacc approximately 2 years earlier. A booster effect was induced by H -77 DE-5 vaccine given intranasally or subcutaneously in only 9-16 percent the groups. Neither RA27/3 nor HPV-77 DE-5 produced any booster effe for persons vaccinated with HPV-77 DK-12.

Mumps Surveillance (Dr. Bennett)

Although there is no national mumps immunization program as such, is evident that in 1973, the lowest number of mumps cases were notif since mumps reporting first began in 1922. The reasons for the d ine are not entirely clear but may represent in part the influence of increasing mumps vaccine utilization.

Influenza Surveillance

Twenty states have now reported typical cases and some outbreaks type B influenza. Virus strains have varied, reportedly typical for typ

influenzaviruses. In general, strains have been intermediate, di .aying
antigen characteristics of the B/Hong Kong variant and of other t : B
viruses recovered in the past 1-2 years. Observed antigen determ .nts
indicate a stable N2 component, but a varying H3. Antigen-antibo
avidity in serologic tests has made vaccine potency evaluations d 'icult.

In a study of older-age persons given monovalent B/Hong Kong vacc : along
with or 2 weeks following standard bivalent vaccine, Drs. Rosenbe and
Noble reported comparable antibody responses. They observed no e .nced
reactions in volunteers receiving vaccines simultaneously.

Immune Serum Globulin for Protection Against Viral Hepatitis

Editorial changes were recommended, particularly those relating t
hepatitis-B and ISG.

Smallpox

A draft proposal on CV-1 vaccine to incorporate into the revised .llpox
statement was reviewed and approved. The Committee restated its .clusion
that the use of CV-1 be limited to a preliminary or conditioning .uniza-
tion prior to regular smallpox vaccination and used only in indiv .als
with dermatologic contraindications to primary vaccination.

Other Business

The Committee reviewed a proposed draft statement on general reco :ndations
underlying immunization: multi-dose vaccines, hypersensitivity t 'accine
components, and simultaneous administration of certain vaccines. .ey
encouraged publication of a general statement to address recurrin .uestions
on interrupted vaccination schedules, hypersensitivity to cell-cu .re-produced
antigens, and which vaccines may safely and effectively be combin or given
simultaneously.

The Committee selected May 16-17, 1974, for its regular spring me .ng.

The meeting was adjourned at 5:00 p.m., February 12, 1974.

I hereby certify that, to the .st of
my knowledge, the foregoing s .ary
of minutes are accurate and c .lete.

David Spencer

Chairman

/22/74
Date